



The Examiner

Naval Hospital Twentynine Palms

"Serving with Pride and Professionalism"

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An Award Winning Publication

December 1998

Military Sick Call, Pediatrics Recognized DoD Wide

By Dan Barber Public Affairs Officer
Naval Hospital Twentynine Palms

Medical Exam (Military Sick Call) and the Pediatric Clinics at the Naval Hospital have recently been recognized as being in the top 10 percent of all clinics in the Department of Defense's (DoD) health care system for the third quarter of Fiscal Year 1998.

The staff of Naval Hospital Twentynine Palms, which includes Military Sick Call,

puts a great deal of effort in providing the best possible services to all beneficiaries. This effort has not gone unnoticed by its customers. Patient satisfaction is surveyed by independent contractor under the direction of the Secretary of Defense for Health Affairs, office of Communications and Customer Service.

The results of these surveys compare all DoD's facilities and have shown the Military Sick Call and the Pediatrics Clinic at the Naval Hospital to be in the top 10 percent for delivering outstanding medical care. The Medical Exam Clinic was also

named as being in the top 10 percent for outstanding customer service. Both of these clinics display their commitment to the Naval Hospital's goals of providing top quality medical service to the Marines and Sailors and their Beneficiaries aboard the Combat Center.

These honors are very important to the staff of the Military Sick Call and Pediatric clinics, not because they come from the Department of Defense, but because they represent feedback from the people they serve, the patients of Naval Hospital Twentynine Palms.

Corpsman's new duty station: Olympic Training Center

By Dan Barber, Public Affairs Officer
Naval Hospital Twentynine Palms



HM3 Kevin Montford at work in the Hospital's Laboratory Department.

HM3 Kevin Montford, of Naval Hospital Twentynine Palms Laboratory Department just received orders... this may not be earth shattering news for most sailors... however, the fact that he is to report for duty at the Olympic Training Center in Colorado Springs is out of the ordinary.

The 25 year-old Panama City, Florida native will only be the second sailor to receive orders to the training center where most of America's world class athletes train for Olympic level competition. He won't be going there to render medical aid to athletes... he will be one of those athletes. Montford will begin a training regime that he hopes will allow him to earn a spot on the U.S. Olympic Triathlon Team. "As soon as I get there, I will be sent to Brisbane, Australia for a three month training program because the training season there is just the opposite of ours," said Montford.

Montford is accustomed to competition; he comes from a large family of four half-brothers and four half-sisters. His mother and father still live in Panama City, FL where his father works in the Insurance business and his mother works in Banking. Montford

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From the Desk of the Command Master Chief...

Leadership Philosophy

Recently our new Executive Officer, Captain Freer met with the Chiefs and shared some of his thoughts about leadership. I thought it would be worthwhile to share these thoughts with the entire command, so with his permission:

Leadership means the ability to have others exceed expectations in achieving the mission. The skill set involved requires "6 C's and a V."

1. **Caring:** This involves stewardship and your personal attention. People like to succeed, therefore recognize their efforts, track and follow advancements, and be proactive in retention efforts. The litmus test is to ask yourself "If this were my child what would I do?"

2. **Competency:** Maintain your professional bearing and skills; understand the rhythm of the command and its mission; know the mission and make sure your people know the mission. Be the best at what you do.

3. **Character:** Your sense of right and wrong, integrity, consistency, and fairness counts a lot in your ability to lead by example and to maintain credibility. The litmus test is to ask "Would my mother be proud of what I do?"

4. **Commitment:** "Talk the talk and walk the walk," demonstrates real energy in what you do. Schedule doing the right things.

Focus the energy and be like a laser and not a light bulb. Maintain the compass heading.

5. **Communicate:** Communicate, communicate, communicate – up and down the chain of command. This is the single most common shortcoming for all of us: Do not assume that because you have static that you have comms! Communication is what keeps the situational awareness peaked and ensures unity of effort throughout a command and within a department.

6. **Common Sense:** "An uncommon virtue." Don't get fooled by the details and keep a look out for the big picture. Don't do stupid stuff. People often lose sight of the objective for a lot of different reasons. Stay above the breakers.

7. **Vision:** You have to have a sense of what you want to accomplish in your division or department. You have to convey that vision to the troops. You may have to convince your boss that your vision is also his vision. Until you have a mission and a vision you have no direction. You have to be able to provide to your people the knowledge of where they are everyday and feedback regarding their progress. Interruptions are detractors – these are management issues. Think in terms of leaving a legacy for your troops. Make sure that some things are better when you leave than they were



HMC Robert Bettis

when you arrived.

You are entrusted with the finest of the Navy's assets, its people. Lead them and train them. Remember "Do your duty in all things. No man (person) can do more; none should do less." Robert E. Lee.

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The **EXAMINER** editor would like to thank all those who participated in this edition.

Goodbye Georgia...



Georgia DeFrancisco receives a Desert Rat Certificate from Captain J.M. Huber, Commanding Officer of Naval Hospital Twentynine Palms, upon her retirement from Civil Service.

Chaplain's Corner...

God Is The Main Christmas Ingredient

By Lieutenant Daniel Dudley, CHC, USNR
Naval Hospital Twentynine Palms Chaplain

The feeling of Christmas is in the air! Like a good London fog, it is so thick you can cut it with a knife. The tinsel and Christmas lights; the decorations and overstocked stores; the gifts under the trees and the wrapping paper, tape and scissors strung all over the house. The ringing of the cash register; the back pain from lifting the newspaper stuffed with ads. This is the only time of the year that you will see a U.P.S. truck going faster than a Dominos delivery van. 'Tis the season of cranky clerks, impatient and demanding customers. The season of spending more than we have, buying more than we can afford, and eating more than our belts can hold.

But wait, something seems to be missing. It appears that we have forgot the main ingredient of Christmas. If we delete Christ from Christmas all we have left is mas. What is a tuna casserole without tuna, or chicken fettuccine without the chicken? What is the McBLT without the bacon? God is the main

ingredient of Christmas.

When Pope Julius the I authorized December 25th to be celebrated as the birthday of Jesus in 353 AD, who would have ever thought it would be celebrated as we do in this century? When Professor Charles Fallen lit candles on the first Christmas tree in America in 1832, who would have ever thought that the decorations would be as elaborate as they are today, and plugged into the wall non the less?

A lot of time has past since 1832, longer still from 353, longer still from that dark night brightened by a special star, the first neon announcement, that Jesus Christ the king was born. As December 25th fast approaches, it gives us yet another opportunity to pause, and in the midst of all the excitement, elaborate decorations, and expensive commercialism, to consider the event of Christmas and the person whose birth we celebrate.

It is only the touch of God that gives Christmas its true joy and meaning. The love of a sacrificial gift greater than anything Santa could carry in his huge bag of



Lieutenant Daniel Dudley

gifts. His incarnation is the fact that forms the mighty foundation of the Christian faith, thrilling us to the depths of our Spirit with the truth that God loves each of us so much that He would not leave us lost. He personally came as a beacon of light in a world full of darkness bringing salvation and illuminated the path of righteousness and love that leads to eternal peace. This all began on that first Christmas when the calendars were reset and hope was born into the world bringing with Him true peace.

God is the main ingredient of Christmas and at Christmas He came to the world to make it complete. That is what makes Dec 25th different from the other 364 days in the year.

Letters...

A Pleasurable Experience

Dear Captain Huber,

My name is Charles Milbourn and I am a retired Navy Petty Officer who recently, at the end of October, had to stay at your hospital.

I would like to take this opportunity to thank some of your staff that helped to make my stay a more pleasurable experience.

The Emergency Room staff went well beyond doing their job and gave excellent care from the moment I arrived. LTJG McPhee, LT Elsner, HM3 Sepulveda, HN Hempel, and HN Contreras were very helpful, and ensured that the standards of Navy Medicine were upheld. LCDR Grubbs, from Family Practice was my physician. He made sure that I was taken care of during my visit to the ER and my stay on MSW.

The staff on MSW were there to take care of me during my inpatient stay. I would like to thank the MSW staff for their efficiency by ensuring that I received my medications and whatever else was needed.

Your MSW and ER staff should be com-

mended for their job well done. I sincerely appreciate their professionalism and representation of Navy medicine during my stay at your hospital.

Sincerely,

Charles Milbourn

Hail and Farewell...

Welcome Aboard

LCDR S. Talmadge	HMC J. Enriquez
LT C. Yates	MSSN F. Williams
LCDR K. Milson	MS3 W. Harris

ENS M. Reny	
LT. R. McKnight	
CDR A. Villaflor	
HM2 P. Huntz	
HA C. Arevalo	
MS3 K. Saunders	
HM1 P. Hankinson	
HM2 S. Chang	
HM3 R. Gross	
MS2 J. Holtry	
HM1 F. Henley	
HM2 T. Washington	
MSSN N. McCloe	

Farewell

LTJG R. Booker
LTJG D. Garcia
LT J. Milburn
HM2 G. Wilson
MS1 A. Manalo
MS3 N. Dimaggio
SK3 L. Schuyler
HM1 J. Ellis
HM3 W. Wilson
MSSN V. Walker
MS3 K. Nelson

So Long Bernice...



Bernice Gomes of Patient Administration receives her Desert Rat Certificate from LT Wales, Patient Administration Department Head.

Here's To Your Health...

Fitness For The Holidays

The holiday season is upon us and with it the excitement, the fun, and the tension of seasonal demands. It seems that there are never enough hours in the day to share the holiday spirit with friends and family, or to fit in our regular workouts. Between shopping, parties, office functions, and community events, it's easy to leave our commitment to exercise behind in the wake of the season's jubilation.

In making your personal choices this season, consider the increasing evidence in the support of exercise as a means of reducing stress and promoting relaxation. The holidays may just be a time when you need exercise the most.

Physical And Psychological Benefits

Compared to the physical benefits of exercise, such as reduced body fat and increased flexibility, strength, and endurance, the psychological rewards of exercise are elusive. Regular exercisers report a variety of benefits, such as feeling better, improved sleep patterns, and less tension, depression, and anxiety. However, these testimonies are often difficult to quantify and document. Research is just now catching up to the many personal claims that physical activity and fitness reduce stress.

Add Vigor To Your Holiday

The extra energy boost from a well-de-

signed workout can add more vigor to your holiday season, giving you the stamina you need to get through your action-packed days. Whether you are interested in the short-term effects of a workout in reducing your daily anxiety, or the long-term effects of training to make your body better able to counter stress before it builds up, keeping up your exercise during the holidays will help.

Vary Your Routine

However, don't let your workout become a stress itself. There is just so much you can do and if you're not enjoying your exercise program it's time for a change. Don't be afraid to relax this season and have fun. Remember, there are many ways to be active—dancing, skating, skiing—and this just may be the time of year to take a break from your regular routine and try something new. Whatever your choice, make it a safe one and have a happy, healthy, holiday season!

Check Out The Command Aerobic Class

Chief Jackson offers a well-rounded step aerobic class (Monday, Wednesday and Friday from 11:30 a.m. to 13:30 p.m., and Tuesday and Thursday from 4:15 to 5 p.m.) which develops heart and lung endurance, muscle strength and endurance, and flexibility. Is this convenient or what? It's right here in the command, it's fun, and you can cater it toward your own fitness level.

Halloween Costume Contest Winners

Best Team MID Nerds

CDR Mock
Susan Green
Lynn Stremlau
Craig Palmer
Tina Garrett

Best Duo Jelly Beans

HM2 Taylor
HM3 Tenney

Best Actor Monk Gone Sour

HM2 Potter

Best Legs Cave Man

HM2 Cipra

Best Military I Will Work For Beer

HM2 Daugherty

Best Civilian Klingon

Dee Tajalle

OLYMPIC...

Continued from page 1

was also a member of the Mosley High School swim team until he graduated in 1991, serving two of those years as captain of the team. "I first saw a Triathlon race in 1989 and thought that I could combine my three favorite sports of swimming, biking and running together and compete too," said Montford.

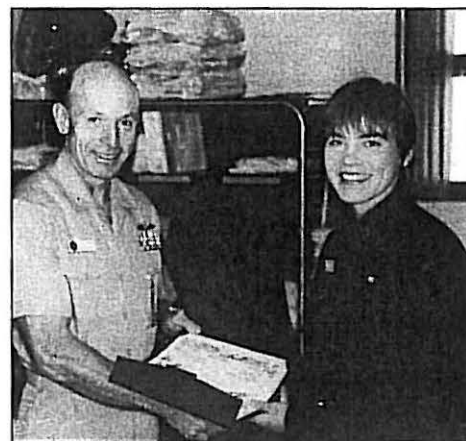
Since joining the Navy in December 1992 and completing Hospital Corps School, Montford has competed in several races both Nationally and Internationally. In June of this year he competed in the Military Nationals at Point Mugu, CA and at the Mili-

tary Worlds in Belgium. Just this past month he competed at the Nationals in Oceanside where he placed second. He also competed in the Hawaii Ironman, and the Adventure Race in Dali, China in November.

Montford has had to fund all of his own travel to competitions; he has had to go on no-cost TAD orders. "I would like to thank Naval Hospital Twentynine and the Laboratory Department for allowing me so much time in my pursuit," said Montford.

For a world class athlete to be looking at long-term goals after sports is pretty tough. "My short-term goals right now are pretty much all-consuming... but after I'm done with the sport, maybe I'll try to get into the Navy SEALs," said Montford.

Headin' For Cooler Climes...



LTJG Rachel Booker receives her Desert Rat Certificate from Captain D.H. Freer, Executive Officer, Naval Hospital Twentynine Palms.

TRICARE question and answer...

What is the difference between emergency care and urgent care?

Most people probably don't think too much about differences between "emergency" medical care and "urgent" care. But, they aren't the same. And the differences could matter—for example, to a person who's enrolled in TRICARE Prime (the Defense Department's HMO-type healthcare option), and who happens to be traveling outside his or her TRICARE region when illness or injury strikes, here's how TRICARE defines the two types of care:

An **EMERGENCY** is a sudden and unexpected medical condition, or the worsening of a condition, which poses a threat to life, limb or sight and requires immediate treatment; or the event is a sudden, extremely painful condition which requires immediate treatment to alleviate suffering. You usually get emergency care at a hospital emergency room. Conditions that require emergency care include loss of consciousness, shortness of breath, chest pain, uncontrolled bleeding, sudden or unexpected weakness or paralysis, poisoning, suicide attempts, drug overdose, acute psychosis, and major depression.

Pregnancy-related medical emergencies involve a sudden and unexpected medical complication that puts the mother, the baby, or both, at risk. In the case of pregnancy, TRICARE does not consider a delivery after the 34th week an emergency.

If you need emergency care, go directly to the emergency room at the nearest hospital, or call 911 if available in your area. Otherwise, call your primary care manager (PCM)—if you're a TRICARE Prime enrollee—or call the health care finder (HCF) toll-free; they'll help you get the closest and most appropriate care. If you, as a TRICARE Prime enrollee, receive emergency medical care and are hospitalized as a result, without your PCM being involved, you or a family member must contact your PCM, or the HCF, within 24 hours of receiving care.

If you're not enrolled in TRICARE Prime, you don't need to make the above notification (since you don't have a PCM—only TRICARE Prime enrollees do). You should, however, make sure that a claim is filed promptly with your TRICARE contractor for the region in which you live, for cost-sharing of the emergency care. If you live in a part of the country that doesn't yet have

TRICARE in operation (basically, all states east of the Mississippi River and north of Tennessee and South Carolina), claims should go to the claims processing contractor for the state or region in which you received the care.

URGENT CARE is medically necessary treatment that's required for illness or injury that would not result in further disability or death if not treated immediately—but treatment shouldn't be put off. The illness or injury does require professional attention, and should be treated within 24 hours to avoid development of a situation in which further complications could result if treatment isn't received.

Examples of conditions that should receive urgent treatment are: sprains, scrapes, earaches, sore throats, rising temperature—conditions that are serious, but aren't life-threatening.

You can get urgent care at various locations (this includes your PCM's office, if you're enrolled in TRICARE Prime), and at urgent care centers. If you're a Prime enrollee, call your PCM, or call the TRICARE contractor's HCF toll-free, for advice and assistance. The HCF (who is usually a nurse) will assess your situation, given the symptoms presented, and will direct you to a specific provider for care, or will authorize you to seek the care and be reimbursed under TRICARE Prime.

If you aren't enrolled in TRICARE Prime, but use TRICARE Extra or TRICARE Standard instead, you can still

ask for advice from your TRICARE service center or the HCF.

If you have any questions about being hospitalized or about advance authorization of care (urgent or otherwise), check with the HCF. You can meet with the HCF on a walk-in basis during normal business hours at your local TRICARE service center (TSC). Or, you can call an HCF for advice and information 24 hours a day, every day, toll-free.

If you're enrolled in TRICARE Prime and are away from your Prime service area, Prime will cover emergency care. Be sure to notify your PCM or the HCF within 24 hours. They'll evaluate your situation and decide whether you should return to your Prime service area for hospitalization there.

If you have to pay up-front, out-of-pocket (other than a normal TRICARE Prime copayment) for emergency or urgent medical care, your TRICARE contractor will reimburse you in accordance with the provisions of TRICARE Prime coverage. Check with your nearest TSC for details on how to get reimbursed.

You should contact your PCM for instructions in a non-emergency situation. If you see a physician without authorization for a non-emergency problem, you'll still be covered for medically necessary care for some of the costs, under the "point-of-service" option. That option pays 50 percent of the allowable charges for covered care after a separate, somewhat higher deductible than that for TRICARE Standard is met (\$300 for an individual and \$600 for a family).

Active-duty Family Member Inpatient Hospital Rate Increases as of October 1st

Effective Oct. 1, 1998, the daily amount active-duty family members pay for inpatient care in civilian hospitals under TRICARE Standard and TRICARE Extra increased from \$10.20 to \$10.45.

The rate increase means that an active-duty family member who's admitted to a civilian hospital for care (except mental health care) under TRICARE Standard or TRICARE Extra will pay the \$10.45 daily rate, multiplied by the number of days spent in the hospital—or a flat fee of \$25, which-

ever total is greater.

The flat \$25 cost-sharing rate also applies to ambulatory (same-day) surgery.

The \$10.45 inpatient rate doesn't apply to any other category of TRICARE-eligible patients, only to active-duty family members. Inpatient care for other categories of TRICARE beneficiaries will, in most cases, be cost-shared under the diagnosis-related group (DRG) payment system for TRICARE Standard and TRICARE Extra.

Please see TRICARE on next page

Be Safe During Holidays...Not Sorry *TRICARE...*

John R. 'Jack' Burns Jr., Safety Manager
Naval Hospital Twentynine Palms

With the holiday season approaching, many of us are looking for things to decorate our homes and workplaces. Many of you have asked about decorations in the hospital. This hospital is equipped with one of the finest detector and extinguisher systems money can buy. These state of the art interactive systems will protect us from fire even if we decide to decorate. At home, you must be much more careful than you are here. The following is intended as a guideline for the use of decorations in the hospital. Safety is our first consideration!

Buy only materials that state "fire resistive construction" or "fire retardant" may be used.

- ✓ No candles
- ✓ No open flames.
- ✓ No flammables
- ✓ No spark generating toys

There are no areas of this hospital that are "PEDIATRIC FREE" — All areas must be considered for children.

All electrics and electronics must have a UL, FM or CU label or they may not be used. Inspections must be conducted by Departmental Safety Reps. If it heats-up, it's probably dangerous. No lights touching tinsel

or paper and no extension cords. DSR's will check with the Safety Office if they have any questions. If they are a child risk, they must be placed high, but, still below the 18" sprinkler rule.

Bite sized decorations are forbidden!

No toys with sharp edges or small parts. They will be bitten or choked on!

All trees must be artificial. They must be braced against falling.

- ✓ No live Christmas trees.
- ✓ No live decorations
- ✓ No decorations that have been alive
- ✓ No edible treats or decorations

should be placed on trees (the stuff that makes the tree fire retardant is not good to eat and can make children sick). No "refrigeration required" foods left unrefrigerated for extended periods of time.

NOTHING is EVER to be attached to the smoke detectors or fire sprinklers.

- ✓ No fire doors covered with paper.
- ✓ No large size or amounts of paper decorations in the halls.
- ✓ No decorations in walkways that may become a trip hazard.

NOW! is the time to check your smoke detectors at home

Things that hang can, will and do fall — Who hangs if it falls?

All this stuff should come down immediately after the holiday and be boxed and stored in the warehouse, not the hospital.

Continued from previous page

Inpatient mental health care at civilian facilities costs \$20 per day for active-duty family members under TRICARE Standard, TRICARE Extra or TRICARE Prime. This rate applies to admissions to:

- Any hospital for mental health services;
- Any residential treatment facility or substance use disorder rehabilitation facility;
- Any partial hospitalization program offering mental health or substance use disorder rehab services.

The daily inpatient mental health rate for other (non-active-duty family member) patients is \$40 per day under TRICARE Prime. The TRICARE Extra cost-share is 20 percent of institutional and professional charges. Under TRICARE Standard, for lower-volume hospitals and units, the mental health care-substance use disorder treatment cost-share will be the lesser of a specific daily rate (\$140 in Fiscal Year 1999) or 25 percent of institutional billed charges. For high-volume hospitals and units, the cost-share is 25 percent of the hospital's specific per diem amounts and separately billed professional charges.

"DRG" rate increase

The TRICARE Standard diagnosis-related group (DRG) daily rate for most civilian non-mental health hospital admissions increased on Oct. 1, 1998, to \$376. The rate had previously remained at \$360 for the past two years. The daily rate will be \$376 for TRICARE Standard-eligible persons other than active-duty family members. They'll pay either the fixed daily rate of \$376, or 25 percent of the hospital's billed charges, whichever is less. The inpatient daily rate for non-active-duty family members at a TRICARE network facility is cost-shared using TRICARE Extra. The cost-share for TRICARE Extra users is the lesser of \$250 per day, or 25 percent of the institution's billed charges, plus 20 percent of the charges by individual professional providers who treat the patient during the hospital stay. Active-duty family members' cost-shares aren't affected by the DRG rates. As noted earlier, they'll pay a small daily fee of \$10.45 for each day in a civilian hospital (\$20 per day for inpatient mental health care) or a total of \$25 for each hospital stay, whichever is greater. When non-active-duty family mem-

Please see TRICARE on next page

FORCE 98...



The Hospital/Headquarters Bn. Football team won its last game of the 1998 season. This was a character building season for the FORCE. After a record breaking 3.5-hour game against AGSE in triple overtime with 15 injuries, victory seemed out of our grasp. However, in the final game of the season, with a convincing 26 to 12 score, CSSG fell to a persistent FORCE attack. The team wants to thank the fans who supported them.

Great American Smoke Out Contest Winners

Winners of the "Guess the Time" of birth on the Great American Smoke Out Day are:

- 1st Terri Murray
- 2nd Beverly Kudebeh
- 3rd Debbie Kaup
- 4th MS3 Saunders
- 5th LTJG Knapp
- 6th Barbara Stout

The baby who was born on the day of the event is Christopher Ortiz, shown here with his Mom and Dad, Marybelle and Mario and the Executive Officer of Naval Hospital Twentynine Palms, Captain D.H. Freer.

A Born Non-Smoker...



Red Ribbon Week...



The Naval Hospital kicked-off Red Ribbon Week for the community and base with a cake-cutting ceremony. Mrs. Rosalyn Stanley was here to cut the cake and show her support for the event.



CFC and Cake Too...

TRICARE...

Continued from previous page

bers are admitted to hospitals that are exempted from the DRG payment system, their cost-share will be 25 percent of the TRICARE-determined allowable charges. DRG-exempt hospitals include: psychiatric, cancer, long-term care, rehabilitation, and sole community hospitals exempt from Medicare's prospective payment program. Hospitals in the state of Maryland are also exempt from the DRG payment system because of its stricter state law.

For more information about DRG payments, contact the health benefits adviser at the nearest uniformed services medical facility, or talk to a staff member at your nearest TRICARE service center.



In an innovative way to raise money for the Combined Federal Campaign, staff members offer desert with a donation.

More Hard Chargers...



Captain J.M. Huber, Commanding Officer, Naval Hospital Twentynine Palms, and LT C. Kelly place the shoulder boards on LTJG Albert Loui, left, during his recent promotion ceremony.

LTJG Marci Labossiere, below, receives a Desert Rat Certificate from Captain D.H. Freer, Executive Officer, Naval Hospital Twentynine Palms.



HM2 Tamara Marks, left, takes the oath of reenlistment from LTJG Loui at a recent ceremony in front of the Hospital Corps Murals.

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